


UTILITY PATENT APPLICATION TRANSMITTAL		Attorney Docket No.: S-100,564 First Inventor or Application Identifier: Stephen R. Foltyn Title: BUFFER LAYER FOR THIN FILM STRUCTURES Express Mail Label No.: ET461825957US	
APPLICATION ELEMENTS		ADDRESS TO: <small>Mail Stop Patent Application Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450</small>	
1. <input checked="" type="checkbox"/> * Fee Transmittal Form (e.g. PTO/SB/17) <small>(submit an original and a duplicate for fee processing)</small> 2. <input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. 3. <input checked="" type="checkbox"/> Specification [Total Pages: 15] <input checked="" type="checkbox"/> Descriptive title of the Invention <input type="checkbox"/> Cross References to Related Applications <input checked="" type="checkbox"/> Statement Regarding Fed sponsored R&D <input type="checkbox"/> Reference to sequence listing, a table or a computer program listing appendix <input checked="" type="checkbox"/> Background of the Invention <input checked="" type="checkbox"/> Brief Description of the Drawings (if filed) <input checked="" type="checkbox"/> Detailed Description <input checked="" type="checkbox"/> Claim(s) <input checked="" type="checkbox"/> Abstract of the Disclosure 4. <input checked="" type="checkbox"/> Drawings(s) <small>(as U.S.C. 113)(Total Sheets: 2)</small> <input type="checkbox"/> Formal <input checked="" type="checkbox"/> Informal 5. <input type="checkbox"/> Declaration & Power of Attorney [Total Pages:] a. <input type="checkbox"/> Newly executed (original or copy) b. <input type="checkbox"/> Copy from a prior application <small>(37 C.F.R. § 63(a) (for continuation/divisional with Box 16 completed)</small> c. <input type="checkbox"/> DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 C.F.R. §§ 1.63(d)(2) and 1.33 (b). 16. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment: <input type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-part (CIP) of prior application S.N. ____/_____. Prior application information: Examiner: Group/Art Unit:		6. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix) 7. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) a. <input type="checkbox"/> Computer Readable Copy b. <input type="checkbox"/> Specification Sequence Listing on: i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or ii. <input type="checkbox"/> paper c. <input type="checkbox"/> Statement verifying identity of above copies ACCOMPANYING APPLICATION PARTS 8. <input type="checkbox"/> Assignment Papers (cover sheet & documentation) 9. <input type="checkbox"/> 37 C.F.R. § 3.73(b) Statement <input type="checkbox"/> Power of (when there is an assignee) Attorney 10. <input type="checkbox"/> Information Disclosure <input type="checkbox"/> Copies of IDS Statement (IDS)/PTO-1449 Citations 11. <input type="checkbox"/> Preliminary Amendment 12. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) (should be specifically itemized) 13. <input type="checkbox"/> Certified Copy of Priority Document(s) (if foreign priority is claimed) 14. <input type="checkbox"/> Nonpublication Request and Certification Under 35 U.S.C. 122(b)(2)(b)(i) 15. <input type="checkbox"/> Other:	
16. CORRESPONDENCE ADDRESS <input type="checkbox"/> Customer Number or Bar Code Label OR <input type="checkbox"/> Correspondence Address Below <div style="text-align: center;">  35068 <small>PATENT TRADEMARK OFFICE</small> <small>(Insert Customer No. or Attach Bar Code Label here)</small> </div>			
Name: Bruce H. Cottrell Address: Los Alamos National Laboratory LC/IP, MS A187 City: Los Alamos State: New Mexico Zip Code: 87545 Country: United States Telephone: (505) 665- Fax: (505) 665-4424			
Name (Print/Type): Bruce H. Cottrell		Registration No. (Attorney/Agent): 30,620	
Signature: <i>Bruce H. Cottrell</i>		Date: July 21, 2003	

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FEE TRANSMITTAL For FY 2003 <small>Patent fees are subject to annual revision</small> <small>(submit an original and a duplicate for fee processing)</small>				Complete if Known																																																																																																																																																															
METHOD OF PAYMENT				FEE CALCULATION (continued)																																																																																																																																																															
1. <input checked="" type="checkbox"/> The commissioner is hereby authorized to charge indicated fees and credit any over payments to: Deposit Account Number: 12-2150 Deposit Account Name: Los Alamos National Laboratory <input checked="" type="checkbox"/> Charge Any Additional Fee Required Under 37 C.F.R. 1.16 and 1.17 <input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27				3. 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